



CERTIFICATE OF MAILING

hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on Dec. 16, 2004

Jo Bryan
Jo Bryan

In Re Application of:

McKinnon, et al.

Serial No.: 09/800,735

Filed: March 7, 2001

Confirmation No.: 4774

Group Art Unit: 2663

Examiner: Ferris, Derrick W.

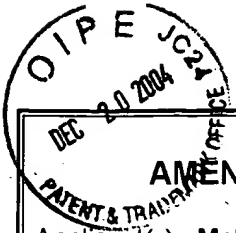
Docket No.: A-8974 (191930-1260)

For: **Method of Allocating Access Across a Shared Communications Medium**

The following is a list of documents enclosed:

Return Postcard
Amendment Transmittal Form
Amendment and Response

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

**AMENDMENT TRANSMITTAL LETTER (LARGE)**

Applicant(s): McKinnon, et al.

Docket No.

A-8974 (191930-1260)Serial No.
09/800,735Filing Date
March 7, 2001Examiner
Ferris, Derrick W.Confirmation No.
4774Group Art Unit
2663Invention: **Method of Allocating Access Across a Shared Communications Medium****Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria VA 22313-1450**


Transmitted herewith is a Response in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	50 -	61 =	0	X \$50.00	\$0
INDEP. CLAIMS	4 -	4 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$0
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> \$120.00	2 ND MONTH <input type="checkbox"/> \$450.00	3 RD MONTH <input type="checkbox"/> \$1,020.00	4 TH MONTH <input type="checkbox"/> \$1,590.00	\$0
Other Fees:					\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0

- ☒ No additional fee is required.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.
- ☐ A Credit Card Payment Form PTO-2038 is attached in the amount of \$ _____
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.


Anthony F. Bonner, Reg. No. 55,01212/16/04
Date